



2016 DEER HUNTING SURVEY (Fall Season)

Hunter's Name: _____
Last First Middle

Current Address: _____
Number Street Apt. Number

City County State Zip

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

1. How many days did you hunt during the following months?

September October November December

2. How many shots did you take during the hunting season? _____

3. Total number of animals harvested?

ADULTS FAWNS
Female _____ Male _____ Female _____ Male _____

4. Number of wounded and unrecovered deer? _____

5. Describe any changes you believe may improve our deer management plan?

Send completed form to:

HUNTING COORDINATOR
P.O BOX 1180
MAPLE GROVE, MN. 55311-6180

**TO ENSURE YOUR FUTURE HUNTING PRIVILEGES, COMPLETE THIS SURVEY AND
RETURN (OR HAVE POSTMARKED) BY FEBRUARY 1, 2017.**